

Design and Construction

AN ISO 9001:2015 CERTIFIED ORGANIZATION

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CONTRACTOR'S SDVOB UTILIZATION PLAN Revised Plan Contract No.: Making false representations or including information evidencing a lack of good faith as part of, or in conjunction with, the submission of a Utilization Plan is prohibited by law and may result in penalties including, but not limited to, termination of a contract for cause, loss of eligibility to submit future bids, and/or withholding of payments. Firms that do not perform commercially useful functions may not be counted toward SDVOB utilization. Submit completed responses to DCSDVOB@ogs.ny.gov Bid Date: Contractor's Name. Address and Federal ID No.: Contract Description/Location: Date Proposal Approved: Date Printed: SDVOB GOAL **S&O CONSTRUCTION SERVICES INC CLINTON CORNERS REGION 8** 5/23/23 11 CHARLES STREET. PLEASANT VALLEY NY 12569 Contract Amount: Work/Job Order: **OGS Project Number:** Work Order Value: 3% 932,829.00 47208-H Federal ID No.: 14-1690439 Anticipated Dollar Value of SEE BDC Certified SDVOB Name. Address and Phone No. Description of Subcontracting/Supplies performance/purchase 328.1S Subcontract/Supplies date(s) VETERAN MECHANICAL SERVICE & SUPPLY PUMPS, HYDRONIC SPECIALTIES AND BOILERS 348 CAFFERTY ROAD, HARPURSVILLE NY 13787 1/1/2024 \$25,000.00 Federal ID No.: 81-1702288 Confirmed ONLY **GREENER FACILITIES** PROVIDE AND INSTALL INSULATION USE **PO BOX 642. AMENIA NY 12501** 1/1/2024 35,962.00 Confirmed 068 FOR Federal ID No .: Federal ID No .: Pursuant to Executive Law Article 17-B, my firm will engage in a good Contractor's Comments: faith effort to achieve the SDVOB goals on this contract. Contractor's Signature: Enter Name: HEATHER CLEVELAND FOR OGS USE ONLY Title: X Accepted Accepted as Noted Notice of Deficiency Issued ACCOUNTS RECEIVABLE SDVOB % \$ E-Mail Address: Date: OGS Authorized Signature: Enter Name: Date: Shafia Booker 5/24/2023 HDECLAIR@SOCONSERV.COM 5/23/2023